



NO FILL CII-V FORM

DPS Number	DEA Number	TSBP Number
This pharmacy HAS NOT REPORTED Schedule II through V prescriptions for the following reason: <input type="radio"/> Experiencing technical difficulties and will have a resolution within 30 days.		
This facility DOES NOT fill prescriptions for: <input type="radio"/> Schedule II <input type="radio"/> Schedule III <input type="radio"/> Schedule IV <input type="radio"/> Schedule V		
Explain:		

PHARMACY		
Pharmacy Name		
Address		
City	State	ZIP
Phone	FAX	

Signature of Pharmacist-in-Charge

Pharmacist-in-Charge Name *(type or print)*

HOW TO SUBMIT YOUR REPORT:

Email
RSD.TXPrescription@dps.texas.gov

Mail
Texas Department of Public Safety
Texas Prescription Program
P.O. Box 4087
Austin, Texas 78773-0439

FAX
(512) 424-5680